

IN THE UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF ILLINOIS
EAST ST. LOUIS DIVISION

GREGG L. DUCKWORTH,

Plaintiff,

-VS-

DAVID J. MADIGAN, MAHER
AHMAD, M.D., and FRANCIS
KAYIRA, M.D.,

Defendants.

No.

3:02-CV-00381-JLF

ORIGINAL

THE DEPOSITION of MAHER AHMAD, M.D., the defendant herein, called by the Plaintiff for examination pursuant to notice and pursuant to the provisions of the Code of Civil Procedure and the Rules of the Supreme Court thereof pertaining to the taking of depositions, taken before me, Jill A. Bleskey, CSR-RPR, License No. 084-004430, a Notary Public in and for the State of Illinois, at Frederick & Hagle, 129 West Main Street, in the City of Urbana, County of Champaign, and State of Illinois on the 5th day of October, A.D., 2006, commencing at 1:30 p.m.

Jill A. Bleskey, RPR
CSR #084-004430

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EXHIBIT

4

1 Q. To your knowledge, did Wexford have
2 an agreement with Champaign County?

3 A. I believe they did, yes.

4 Q. And what is your understanding of the
5 terms of that agreement between Wexford and
6 Champaign County?

7 A. I wouldn't know. I didn't -- I
8 didn't look at it. I wasn't part of it.

9 Q. Whether it was part of the agreement
10 or not, has it ever been your understanding that
11 Wexford agreed to provide medical care to the
12 inmates of the Champaign County Jail?

13 A. Yes.

14 Q. Okay. Have you personally ever
15 entered into any agreements with Wexford?

16 A. I had a -- I was an independent
17 contractor for Wexford, I was not an employee of
18 them.

19 MR. HAGLE: That's at the time of any
20 involvement with Mr. Duckworth, correct?

21 THE WITNESS: That's correct.

22 BY: MR. KILPATRICK

23 Q. You mentioned the term independent

1 just to avoid any confusion, I'm interested only in
2 your time as the medical director of the Champaign
3 County Jail, while you worked in that capacity as
4 the medical director. In a typical week how many
5 hours would you spend performing your duties as
6 medical director?

7 A. Actually the agreement was for a
8 maximum of eight hours per week.

9 Q. Did that include both the screening
10 physicals portion of your duties and the sick call
11 portion of your duties?

12 A. Yes.

13 Q. Did Wexford ever provide you a
14 written job description for your duties as medical
15 director?

16 A. Not to my recollection.

17 Q. How did -- how did you come to have
18 the title listed in Exhibit 1 of medical director?

19 A. That's what they called their medical
20 doctor over there.

21 Q. And was that referred to by people
22 from the Champaign County Jail as well as people
23 from Wexford?

1 had while you were present as the medical director
2 of the jail?

3 A. Similar. To be honest with you, I'm
4 not sure if she was involved with screening of the
5 sick calls, I think that was mainly the nurse who
6 did that in both facilities. But again, she
7 assisted me on, you know, sick calls and screening
8 calls.

9 Q. Let me ask you a few questions about
10 the sick call process. What is your understanding
11 of how an inmate would go about getting a visit
12 with you as the medical director?

13 A. Basically what I know is that they
14 submit a request. And I believe it was even -- I
15 think it was a yellow form, if I remember
16 correctly. And they get screened by the nurse and
17 then the nurse would call me and say I have five
18 patients for you to see or two or whatever and I'd
19 tell them I'll be in at six o'clock or, you know,
20 and then she'd have the patients ready.

21 Q. Would you be provided a copy of this
22 yellow request form that you mentioned?

23 A. When the inmate is -- comes in to be

1 seen, yes, that yellow form is available.

2 Q. Would the nurse or the LPN typically
3 be the person that would hand you that complaint
4 form?

5 A. Yes. I think, if I remember
6 correctly, usually they get stapled along with my
7 progress note sheets.

8 **MR. HAGLE:** For the record, you said
9 complaint form, you meant the request form?

10 **MR. KILPATRICK:** I apologize, I did
11 mean the request form.

12 **THE WITNESS:** Right.

13 **BY: MR. KILPATRICK**

14 Q. Is your answer the same?

15 A. Yes.

16 **MR. HAGLE:** Because there are also
17 grievance forms which is completely different.

18 **MR. KILPATRICK:** I understand.

19 **BY: MR. KILPATRICK**

20 Q. I'm referring only to an inmate's
21 request to receive medical treatment.

22 A. Correct.

23 Q. Okay. While you were the medical

1 director at the jail, if an inmate had a request to
2 speak to a doctor, would you have been the doctor
3 that he would have been directed to see?

4 A. Yes.

5 Q. Okay. To the best of your knowledge,
6 were there any other doctors that would provide
7 treatment to inmates during the time that you were
8 medical director at the Champaign County Jail?

9 A. Within the facility, within both
10 facilities?

11 Q. Yes. Within the facility, would any
12 other doctors provide treatment to the inmates?

13 A. No.

14 Q. And as part of your responsibility as
15 being the medical director, would you sometimes
16 have occasion to refer an inmate to an outside
17 facility for treatment?

18 A. Yes.

19 Q. Okay. Would that sometimes be in the
20 form of testing?

21 A. Yes.

22 Q. Okay. And I presume there would be
23 some types of medical treatment that you simply

1 was an employee of Champaign County?

2 **A.** No, I don't.

3 **Q.** Did any of the medical staff at the
4 Champaign County Jail, other than you, have
5 authority to refer an inmate to an outside facility
6 or doctor?

7 **A.** Quite honestly, I wouldn't know.

8 **Q.** Do you have any reason to think that
9 there might be someone that would have that
10 authority to refer an inmate outside to another
11 doctor?

12 **MR. HAGLE:** Well, I'm going to
13 object, argumentative. He just said he didn't
14 know. Go ahead and answer.

15 **THE WITNESS:** Usually what happened
16 if somebody needed to be referred the nurse would
17 discuss that with me, that was the usual line of
18 action. But whether or not they had the authority
19 to do that or not, I mean, to refer independently,
20 I couldn't answer that.

21 **BY: MR. KILPATRICK**

22 **Q.** Do you recall any times, while you
23 were the medical director at the jail, where an

1 inmate would have been referred to an outside
2 facility that you did not authorize?

3 **A.** No.

4 **Q.** Did any of the medical staff at the
5 jail, during the time that you were the medical
6 director, have authority to write prescriptions for
7 medication for the inmates?

8 **A.** There were some medications that were
9 available in the commissary and those did not need
10 a doctor's approval.

11 **Q.** Can you tell me the names of those
12 medications, if you remember?

13 **A.** It was simply pain medications,
14 Ibuprofen, Tylenol.

15 **Q.** Would it be fair to say that those
16 medications would all be over-the-counter
17 medications that could all be purchased without a
18 prescription?

19 **A.** Correct.

20 **Q.** Okay. Of the time that you would
21 spend in a typical week at the Champaign County
22 Jail, how much time would you spend in the old
23 building versus the new building?

1 symptom?

2 **A.** It could be indicative of some kidney
3 disease, some nephritis. It could be indicative of
4 kidney stones, it could be indicative of cancer,
5 some diseases of the urinary system.

6 **Q.** Is it correct to say that gross
7 hematuria is often considered an indicating symptom
8 of some of those same symptoms that you just listed
9 for me?

10 **A.** It's one of the signs. Of course I
11 forgot to mention also trauma.

12 **Q.** And hematuria or gross hematuria can
13 be an indicating symptom for a variety of cancers
14 throughout the urinary system; --

15 **A.** That's correct.

16 **Q.** -- is that correct?

17 **A.** That's correct.

18 **Q.** And that would include bladder
19 cancers?

20 **A.** That's correct.

21 **Q.** That would include invasive or
22 malignant cancers as well?

23 **A.** Correct.

1 allergies, patient is allergic to penicillin.

2 Physical exam -- PE, physical exam, not in
3 distress. Abdomen, soft, no tenderness. Renal
4 angles free, in other words free of tenderness.

5 Penis was examined. One sonometer pea sized lump,
6 open parentheses, hard texture, closed parentheses,
7 left aspect, mid-shaft, no discharge, meaning no
8 discharge from the penis, and no warty lesions.

9 Q. And if you could continue by just
10 reading that last section underneath special
11 instructions.

12 A. A/P, assessment and plan. Number 1,
13 painless hematuria; Number 2, questionable penile
14 mass. And the plan was urology referral.

15 Q. Do you have a recollection, as you
16 sit here today, of seeing Mr. Duckworth on or about
17 August 24th of 1999 that led you to prepare this
18 report?

19 A. Yes.

20 Q. Is it your understanding that Mr.
21 Duckworth orally explained to you that he was
22 seeing blood in his urine at the time of your first
23 meeting?

1 **A.** Yes.

2 **Q.** Okay. The reference at the bottom of
3 the page -- or the statement at the bottom of the
4 page, urology referral, was that a notation to you
5 of a type of treatment that you would prescribe for
6 Mr. Duckworth in the future?

7 **A.** No. This was an order, urology
8 referral. So patient needs to be referred to
9 urology. This was the plan. Assessment, as
10 mentioned -- AP, assessment and plan. So the plan
11 was urology referral.

12 **Q.** To whom or to where did you refer Mr.
13 Duckworth as part of this order that's dated August
14 24th?

15 **A.** To the urology department. And the
16 people who take care of that would be the nurse and
17 the facility. I did not overlook their referral
18 process.

19 **Q.** You mention the term urology
20 department. What department or where are you
21 referring to that, is that at a hospital?

22 **A.** No. It's usually a clinic.

23 **Q.** At a clinic?

1 **A.** Correct.

2 **Q.** And you did not write the word done
3 on the line below that?

4 **A.** No, I didn't.

5 **Q.** Okay. So let's move up back to the
6 analysis section. Remind me again what that line
7 means, the R/O?

8 **A.** Rule out urinary tract infection.

9 **Q.** Okay.

10 **A.** R/O is short for rule out.

11 **Q.** Okay, I understand. As of the date
12 of Exhibit 8 here, had you made a diagnosis as to
13 the cause of Greg Duckworth's hematuria that you
14 had previously seen?

15 **A.** No, I haven't.

16 **Q.** Okay. On the line that begins the
17 capital letter A on Exhibit 8, what were the facts
18 that led you to rule out urinary tract infection as
19 stated in Exhibit 8?

20 **A.** It was something -- I wanted to rule
21 out urinary infection, there was no specific facts.

22 **Q.** How did it come about that you ruled
23 out urinary tract infection?

1 **A.** I didn't rule it out, I wanted to
2 rule it out.

3 **Q.** So this is a statement of intent?

4 **A.** To rule out, yes. Yes. To rule out.

5 **Q.** In other words, I must rule out in
6 the future?

7 **A.** Correct.

8 **Q.** So you had not done that --

9 **A.** No, no.

10 **Q.** -- at that point?

11 **A.** Correct.

12 **Q.** And do you -- do your symbols on the
13 line beginning with P that says check urinalysis,
14 what does that indicate to you?

15 **A.** It's to obtain urinalysis.

16 **Q.** Okay. Do you know whether -- as of
17 the date of this Exhibit 8 whether you had reviewed
18 any of Greg Duckworth's urinalysis forms?

19 **A.** No.

20 **Q.** Okay. I'll ask you to set that
21 aside. I'm going to hand you what has been marked
22 as Exhibit 9. Please take a chance to look over
23 it. And for the record, I'll read that the printed

1 date at the top left-hand corner of the form is
2 October 9th, 1999. And Dr. Ahmad, to save some
3 time on questions that I had previously asked, do
4 you see Mr. Duckworth's name appearing in the upper
5 shaded area --

6 **A.** Yes.

7 **Q.** -- of the left-hand part? And again,
8 your name does appear as the submitting doctor in
9 the non-shaded portion of the form?

10 **A.** Yes.

11 **Q.** Okay. Do you recall receiving this
12 urinalysis report that's contained in Exhibit 9?

13 **A.** No.

14 **Q.** Okay. Do you recall ordering this
15 urinalysis report for Mr. Duckworth?

16 **A.** Yes.

17 **Q.** Okay. Were you informed of the
18 results of this urinalysis test contained in
19 Exhibit 9?

20 **A.** I believe I have been.

21 **Q.** How was it that you were informed of
22 the results of this test?

23 **A.** Usually if I requested a test, unless

1 I've actually reviewed the test, sometimes I get a
2 phone call from the staff saying -- informing me of
3 the results.

4 Q. And that staff would have been the
5 staff at what location?

6 A. At the jail.

7 Q. At the jail?

8 A. Correct.

9 Q. I'm going to ask you to look at a
10 particular part of this form. Do you see the line
11 that reads urine blood?

12 A. Yes.

13 Q. To the right of that is the number 25
14 contained in a box; is that correct?

15 A. That's correct.

16 Q. And to the right of that is the
17 letter H, do you see that?

18 A. Correct.

19 Q. All right. I'm going to ask you a
20 couple questions about that. First, what does the
21 category urine blood represent to you?

22 A. It indicates the microscopic
23 hematuria or presence of blood in the urine.

1 asked.

2 A. As far as no treatment has been
3 prescribed, yes. Up until then no treatment has
4 been prescribed.

5 Q. Okay. Do you recognize the
6 handwriting on that portion that I asked you to
7 read aloud here on Exhibit 16?

8 A. Well, I recognize the signature, I
9 could read the signature who was Lu Wilson who was
10 the RN.

11 Q. Okay. And you can set that aside for
12 me, thank you. I'm going to hand you now what has
13 been marked as Exhibit 17. And again, for the
14 record, this exhibit is dated in the upper
15 left-hand corner February 16, 2000. Do you -- Dr.
16 Ahmad, do you recognize the signature or mark that
17 appears at the bottom of this page to be your
18 signature?

19 A. Yes, I do.

20 Q. And again, that indicates to you that
21 you have reviewed this -- at one time you received
22 and reviewed this report?

23 A. Correct.

1 **A.** Correct.

2 **Q.** Okay. You can set that aside. I'll
3 hand you now what has been marked as Exhibit 22.
4 And while you're looking over that I'll state that
5 this exhibit contains the handwritten date of March
6 14th, 2000. Dr. Ahmad, again, this is one of the
7 doctor's orders sheets similar to the types of
8 sheets we've looked at earlier, correct?

9 **A.** Correct.

10 **Q.** And do you recognize the handwriting
11 in the blanks following the letters S, O, A, P to
12 be your handwriting?

13 **A.** Correct.

14 **Q.** And do you recognize the signatures
15 on the line for physician to be your signature?

16 **A.** Yes.

17 **Q.** Okay. As you've done before, will
18 you please read for me the handwritten portions on
19 the blanks beginning with the letters A and P?

20 **A.** No significant change in urine, mild
21 increase in urine blood, no indication for further
22 follow-up.

23 **Q.** Starting at the bottom, what does the

1 statement "no indication for further follow-up"
2 mean to you?

3 **A.** Means no further follow-up as far as
4 the urine blood and change in the urinalysis is
5 concerned.

6 **Q.** As of the date of this Exhibit 22,
7 was Mr. Duckworth still presenting with hematuria?

8 **A.** Yes.

9 **Q.** And that hadn't -- the presence of
10 hematuria in his blood, according to your notes
11 here in Exhibit 22, had not changed?

12 **A.** Yes, he had urine in the blood.

13 **Q.** And can you tell me the reason for
14 not prescribing a further follow-up treatment for
15 Mr. Duckworth's hematuria?

16 **A.** Well, in the previous assessment and
17 the previous visits I requested review of the old
18 records of the patient. Up until this point I was
19 under the impression that the patient is being
20 followed by urology and on a future visit I
21 realized that patient is -- on a future -- as
22 indicated by future records I realized that the
23 patient has not actually seen urology and has not

1 actually been evaluated by urology so I took
2 different actions.

3 Q. What do the marks in the bottom
4 left-hand corner that are handwritten on Exhibit 22
5 mean to you?

6 A. Those aren't my marks.

7 Q. Okay. There is a check symbol, an X,
8 and then some words. Can you interpret for me, to
9 the best of your abilities, what those marks mean?

10 A. No, I can't.

11 Q. Okay. I'll ask you to set that
12 aside. Going to hand you what's been marked as
13 Exhibit 23. Again, for the record, this form is --
14 or this exhibit is dated March 16th, 2000 in the
15 upper left-hand corner. Dr. Ahmad, again, does
16 this Exhibit 23 appear to be one of the doctor's
17 orders forms that would have been used while you
18 were medical director at the Champaign County Jail?

19 A. Yes.

20 Q. And do you recognize the handwriting
21 in the blanks on the middle of the form to be your
22 handwriting?

23 A. No, it's not my handwriting.

1 Q. And did you have a plan for
2 treatment?

3 A. Yes.

4 Q. Now, when you say -- and you said
5 this repeatedly throughout the deposition. You
6 were asked about each of these five visits and you
7 were asked by Counsel for the plaintiff, well did
8 you ever diagnose a cause of his hematuria and I
9 think you told us you did not?

10 A. Correct.

11 Q. Why not?

12 A. Because I referred the patient
13 immediately to urology. I was under the impression
14 throughout that the patient is being seen by
15 urology.

16 Q. And then you were asked, did you --
17 repeatedly for each of the times that you saw the
18 patient -- by counsel for the plaintiff, if you
19 ruled out a cause for the hematuria and you said
20 no. Why not?

21 A. For the same reason.

22 Q. Can you explain that answer?

23 A. For the same reason, because I